

City of Farmington

APPLICATION FOR CONSTRUCTION PERMIT

Permit Number: _____ **PROJECT INFORMATION** ______ Lot: ______ Zoning: _____ Project Address: Applicant Name: Phone #: Applicant Address: Phone #: Property Owner(s): Owner Address: **CONTRACTOR INFORMATION** General Contractor: Phone #: General Contractor Address: Mechanical Contractor: Phone #: Electrical Contractor: Phone #: Plumbing Contractor: Phone #: Fire Prevention Contractor: Phone #: Design Professional: Phone #: Const Type: Use Group: Occupant Load: Const. Value **DESCRIPTION OF PROJECT** Height and Area New or Requested Utilities **Fire Protection System** Type of Work Water Service _____ INCH Area _____ SQFT ____ Fire Extinguishers New ____ Alteration Length _____ FT Sewer Service _____ INCH ____ Sprinklers ____ Change of Use Width _____ FT Electric Service _____ AMP ____ Smoke Alarms Height _____ FT Manufactured _____ Overhead ____ Hood System ___Other _____ _____ Underground ____ Fire Alarm Stories _____ I CERTIFY THAT I AM THE OWNER IN FEE OR AGENT AUTORIZED TO APPLY FOR THE BUILDING PERMIT. IN ADDITION, I CERTIFY THAT I AM AUTHORIZED TO APPLY FOR THE ABOVE LISTED TRADE PERMITS ON BEHALF OF THE LISTED LICENSEES. I UNDERSTAND THAT THE SUBMITTAL OF INCOMPLETE PLANS OR FAILURE TO COMPLETE THIS APPLICATION IN ITS ENTIRETY MAY RESULT IN DELAY OF PLAN REVIEW AND PERMIT APPROVAL. Applicant Signature: _____ Date: